

Revision: HCFA-AT-80-38 (BPP)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State/Territory: Colorado

Citation

1.2 Organization for Administration

- (a) Attachment 1.2A contains a description of the Organization and functions of the Department of Health Care Policy and Financing and an organizational chart of the Department.
- (b) Within the State agency, Health Plans and Medical Services has overall management and administrative responsibility for the Medicaid Program. Attachment 1.2-B contains a description of the organization and functions, and an organizational chart of Health Plans and Medical Services.
- (c) Attachment 1.2-C contains a description of the Kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.
- (d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). Attachment 1.2-D contains a description of the staff designated to make such determinations and the functions they will perform.

TN No. 99-004

Supersedes

TN No. 94-029

Approval Date 09/27/99

Effective Date 04/01/99